

DEPARTMENT OF MENTAL HEALTH

POLICY / PROCEDURE



SUBJECT: TRANSPORTATION FOR MEDI-CAL BENEFICIARIES AND INDIGENT CLIENTS	POLICY NO. 202.25	EFFECTIVE DATE 11/15/02	PAGE 1 of 4
APPROVED BY: Director	SUPERSEDES	ORIGINAL ISSUE DATE	DISTRIBUTION LEVEL(S) 2

- PURPOSE:** 1.1 To establish and specify client transportation services for Medi-Cal beneficiaries and indigent Department of Mental Health (DMH) clients and to outline the steps which assure reimbursement for client transportation services.
- POLICY:** 2.1 It is the policy of DMH to utilize specific contractual transportation companies in a prompt manner for services which have been authorized for both indigent and Medi-Cal clients.
- PROCEDURES:** 3.1 Transportation Services
- 3.1.1 All requests for ambulance services from DMH, as the Local Mental Health Plan (LMHP), for client transportation service authorization, including ambulance, ambulette and van, shall be authorized only by the ACCESS Telecommunication Center program (800-871-5551).
- 3.1.1.1 No reimbursement for client transportation services shall be made without the prior authorization of the ACCESS Telecommunication program.
- 3.1.2 L.A. Care and Health Net Plan Partners are responsible for all transportation services for Medi-Cal beneficiaries enrolled in these plans, except for specific services required of the LMHP (See Section 3.1.3). The State Department of Health Services (SDHS) is responsible for the transportation needs of Los Angeles County Medi-Cal beneficiaries who are not enrollees of either of the two plans above.
- 3.1.3 The LMHP (DMH) is responsible for authorization and reimbursement for transporting Medi-Cal beneficiaries from one psychiatric hospital to another psychiatric hospital, or to another 24 hour residential program, when the client transfer results in lower costs to the LMHP (See Title IX, Chapter 11 of the California Code of Regulations (CCR), Section 1910.355).
- 3.1.4 The LMHP is responsible for all transportation services delivered to indigent clients.

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3.2 Transportation Authorization

When the ACCESS Telecommunication program is contacted by DMH directly operated and contract clinics, PMRT teams or other authorized staff or programs, the following procedures shall be followed:

3.2.1 A log shall be maintained on all requests for client transportation.

3.2.2 One of the ambulance companies with whom DMH has a contract shall be contacted and authorization provided for the transportation, if appropriate.

3.2.3 The ACCESS Telecommunication program shall complete a Patient Transportation Order (PTO).

3.2.3.1 One copy of the signed form shall be sent to the ambulance company for claiming purposes.

3.2.3.2 One copy shall be sent to the agency or staff requesting the transport.

3.2.3.3 One copy shall be sent to the DMH Accounting Division for reconciliation with the claim form submitted by the ambulance company.

3.2.3.4 One copy shall be filed at the ACCESS Telecommunication program.

3.2.4 Authorization provided by the ACCESS Telecommunication program shall be entered on a weekly Transportation Request Log which shall be sent to the Accounting Division to confirm requests for reimbursement submitted by the ambulance company.

3.2.4.1 The Medi-Cal status of each beneficiary using ambulance/ transportation services shall be recorded on the Transportation Request Log.

3.3 Process for Reimbursement for Services

3.3.1 Transportation companies shall receive a copy of the PTO after the ambulance service is approved.

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3.3.2 The transportation company shall submit a claim along with a copy of the PTO to the DMH Accounting Division in a timely manner.

3.3.2.1 The DMH Accounting Division shall compare the ambulance/ transportation company copy of the PTO with the copy received in the Accounting Division.

3.3.2.2 The DMH Accounting Division shall also compare the PTO with the information contained on the Transportation Request Log.

3.4 Procedures for Special Exceptions

3.4.1 All requests for transportation authorization services for Medi-Cal beneficiaries or indigent clients shall be processed in the manner identified in the sections above.

3.4.2 All requests for transportation authorization or reimbursement services for Medi-Cal beneficiaries who are members of one of the Two Plan Models (L.A. Care or Health Net), shall be made to the Plan Partner in which the Medi-Cal beneficiary is enrolled. When the ACCESS Telecommunications program authorizes medical transport in the absence of a timely authorization from a Plan Partner, a claim for reimbursement for these services shall be made to the appropriate Plan Partner.

3.4.3 Reimbursement for ambulance transportation services for Medi-Cal beneficiaries who are not members of the Two Plan Models, are the responsibility of the Medi-Cal program. When the ACCESS Telecommunications program authorizes medical transportation in the absence of a timely authorization from Medi-Cal, a claim for reimbursement for these services shall be made to the Medi-Cal program.

3.4.4 The ACCESS Telecommunication program shall arrange all transportation for clients from other Counties who must be returned to their County of residence for treatment reasons or other reasons deemed appropriate by the ACCESS Telecommunication program.

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3.4.5 Notwithstanding any other claim for client transportation services reimbursement, the LMHP has the sole responsibility for any transportation issue which arises from Title IX, Chapter 11, Section 1810.355 of the California Code of Regulations.

AUTHORITY: California Code of Regulations, Title IX, Chapter 11, Section 1810.355

REVIEW DATE: This policy shall be reviewed on or before June 1, 2007.